

<h1 style="margin: 0;">TRANSMITTAL FORM</h1> <p style="font-size: small; margin-top: 10px;">(To be used for all correspondence after initial filing)</p>	Application No.	10/588,637	
	Filing Date	August 4, 2006	
	First Named Inventor	Stumpf, A.	
	Examiner Name	TBD	
	Group Art Unit	TBD	
	Confirmation No.	9800	
Total Number of Pages in this Submission: 3		Attorney Docket No.	379612-250US (397490)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Substitute PTO Form 1449 <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts Notice/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 C.F.R. §1.52 or §1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After-Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Combined Revocation and Power of Attorney and 37 C.F.R. §3.73(b) and 3.71 Statements and Request for Change of Attorney Docket Number <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Additional Enclosure(s) (specify): <input checked="" type="checkbox"/> Combined Revocation and Power of Attorney and Statements (2 pp)
Remarks: Please address all correspondence to Customer Number 37509 The Director is hereby authorized to charge any fees that may be required in connection with the papers submitted herewith that have been inadvertently omitted, specifically including any extension fees that may be required under 37 C.F.R. § 1.136(a), to Deposit Account No. 50-2778		

SIGNATURE OF ATTORNEY OR AGENT			
Signature		Date	May 15, 2008
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